Exhibit B

Declaration of Dr. Ali Al-Timimi (April 30, 2020)

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF VIRGINIA ALEXANDRIA DIVISION

)	
UNITED STATES OF AMERICA,	j	
Plaintiff,)	x 4
v.)	Case No. 1:04-cr-385 (LMB)
ALI AL-TIMIMI,)	
Defendant.)	

DECLARATION OF DR. ALI AL-TIMIMI

Under 28 U.S.C. § 1746, I, Dr. Ali Al-Timimi, state the following:

- 1. I am currently incarcerated in the H-Unit of the USP Florence ADMAX prison in Florence, Colorado.
- 2. Prior to my incarceration, I was an assistant professor at the Center for Biomedical Genomics at the George Mason University in Fairfax, Virginia. Because of my background and training in biology, several other inmates here in the H-Unit have voiced their concerns to me about the ongoing COVID-19 pandemic and requested that I write a letter to prison officials.
- 3. On March 8, I wrote a letter to the H-Unit counselor, Mr. Holbrooks, that outlined my thoughts and concerns. I am attaching a copy of that letter to this declaration and attest that it is accurate to the best of my knowledge. I submitted this letter prior to discussing or contemplating the present motion for release with my attorneys. Indeed, the letter was submitted prior to the Bop to the Bop to know steps to limit (avided).

 4. As of today, the H-Unit is still taking no apparent steps to screen inmates for transmission.

COVID-19. For example, it is not monitoring our temperatures for fever. Nor has any in mate in H-Init, to the best of my knowledge, under your any testing. Additionally, certain staff on embers who much in H-Init have held us (collectively) that their absence was due to self-quarantice for 14 days, whether this was said in seit, or in the F cannot tell.

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- The H-Unit is also continuing to require that inmates rotate cells regularly, despite 5. our numerous requests that such rotations be suspended for the duration of the pandemic. The prison also declined our request that the common shower facilities (shared with the adjacent J-Unit) be cleaned daily.
- 6. I have had asthma since the age of 5, which is treated with two medications. The first is an oral corticosteroid inhaler (mometasone furoate), which I use daily. The second is an albuterol sulfate "rescue" inhaler, which I use as needed. Last year, after catching a cold, it worsened such that I needed to be placed on the oral steroid prednisone twice. I was also given a breathing treatment that consisted of oxygen combined with another medication for about 25 minutes.
- 7. I have also been diagnosed with hypertension, which is currently treated with the following medications:
 - Losartan potassium, 50 mg. (Increased lastyear from 25 mg) AMA

- b. Aspirin, 81 mg.
- Hydrochlorothiazide, 50 mg (recently increased from 25 mg). c.
- d. Amlodipine, 5 mg (recently added in March).
- 8. In the event of a hearing, I request waiver of any in-person appearance in order to avoid the risk of COVID-19 infection during transfer. Also as an immate ander SAMI, my morement within Apx or transfer trom, can be a completated and ardious procedure. I so declare, under penalty of perjury, that the foregoing is true and correct.

Executed on: 2020, 2020

(1) Lost meekend, April 26, 2020, I was required to more cells. While SAMIN mater in Hulit have been under zyn hour lockdown for breeks and xe have had no recreation on the argument that this is to protect us from corrorg infection; we cannot have our common showers cleaned daily nor have toucher appearating of cell 2 notations to protect us from viral transmission temperary suspensión

Dr. Ali Al-Timimi # 48054 -083 Mr. Holbrooks H-Onit Counselor March 8th, 2020 As you are aware, prior to my in carceration, I was an assistant professor at the Center for Biomedical Genomice, the George Mason University, Fairfax, Virginia. During my time at George Mason, I published my research in preer reviewed scientific Journals, as well as co-authored a chapter in a text book. Moreover, I have presented my findings at both international and national orn ferences. Recently, a number of inmates here in H-Unit have voiced to me their concerns about the on-going corona mrus (corib-19) pandemic These is mates regrested that I write the warden in the belief that my words would be taken with greater seriousness. However, given that I have known you for a number of years, and given that you are also an advocate for correctional

staff as "union rep" in addition to your rule as inmate counsalor — I felt it best to write you directly. With that is mind, here are my thoughts on the corona virus epidemic.

(1.) Surreillance of inmates for warning eigns:

(a) Correctional efficers should be instructed by ADX medical staff to recognize warning signs of possible corona vival in feetien among inmates. As you know, immates often apathetic, if not outright hospite, toward purson staff. Unlike with the general population no mates are not typically interested in self-neporting any illnesses they suffer. For these reasons, it is important that ADX aux staff are proactive in identifying possible infection among immates. If an immate appears III, he should be locked down until medical staff can make an assessment as to if the immate is suffering from seasonal allergies, for instance, or is possibly in feeted.

(b.) ADX medical staff should postockets similar protects those at port of entries. All invantes should be asked if they are currently experiencing fever or other five like symptoms. To gavantee tothfulness in reporting spot cheeks of an inmate's temperature can be made.

ADX regularly performs spot some analyses of its immate

population to determine intoxication. It should not be over taxing for medical shaff to perform surveillance walk throughs as part of an infection protocol. (2) Limiting the number of immate to immate instacts, and staff to in mate emtacts. While the restrictive nature of ADX can be advantageors to curtaining vival transmission there remains a number of possible mays for infection. As a vesult: (a.) ADX should consider temporary suspension of cell rotations until such time the corona virus consis has passed. crisis has passed. (b.) ADX should consider modifying its schedule for commissary delivery (for example, moving to a two week schedule rather than weekly) , indoor recreation, and electronic library use. (c) For new arrivals to ADX, there should be some protocol in place to determine it they are possible carriers of corona vivus. As you are well aware, when a SAM inmate more from It-unit to Fronit, he is locked down for a week to make sure he can integrate with his phase I group. Something Similar can be instituted for new ADX arrivals to make some they are not possible carriers

(d.) I have begun notice correctional officer xearing gloves while serving tray. However, since an officer may serve dozens of its mater the use of the same point of gloves will do little to pattern to custail vival spread. At a minimum (at travel with H/I units), gloves should be changed at every tree.

(e) Meal carts should be thoroughly cleaned (extension and intension) after every meal. My gut feeling is that there meal carts could be the main source for transmission, if not throughly cleaned after each meal service.

(f) As you know, for H and I units SAM immodes use common shapers. If any immate becomes infected in the or I unit, the current cleaning schedule will prove methering.

(f) Rephraes need to be exped down with disinfectant following use.

Mr. Holbrooks, I apologize for any intrusion, As I have said, a number of inmotes have requested I write to ADX about proactive steps to customil transmission. As I have regularly dealt with you for a number of years, I felt it best to approach you rather than others. My hape is that your dual role of advocate for inmates (as counseled) and staff (as "union rep") will help those concerns to be heard. Proactive achin on part of ADX now.

Can help assid a later crisis. I thank you for your time.

Respectfully, Ali Al-Timinin H/205